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PTO/SB/22 (10-07)

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2007 *(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)*	Docket Number (Optional) 082368-004900US
Application Number 10/543,003	Filed April 24, 2006

For LRP4/CORIN DOPAMINERGIC NEURON PROLIFERATIVE PROGENITOR CELL MARKERS	
Art Unit 1647	Examiner Landsman, Robert S.

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	Fee	Small Entity Fee	
☐ One month (37 CFR 1.17(a)(1))	$120	$60	$
☐ Two months (37 CFR 1.17(a)(2))	$460	$230	$
☒ Three months (37 CFR 1.17(a)(3))	$1050	$525	$ 1050
☐ Four months (37 CFR 1.17(a)(4))	$1640	$820	$
☐ Five months (37 CFR 1.17(a)(5))	$2230	$1115	$

☐ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number __20-1430__. I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the

☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number __34,774__

☐ attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34 _____

Signature	11/15/07 Date
Kevin Bastian, Reg. No. 34,774 Typed or printed name	415-576-0200 Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of __1__ forms are submitted.

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